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THE RURAL DISTRICT OF ALTON

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

CHIEF PUBLIC HEALTH INSPECTOR

for the year

1956



THE RURAL DISTRICT OF ALTON

A N N U A L R E P O R T
OF THE
MEDICAL OFFICER OF HEALTH
AND
CHIEF PUBLIC HEALTH INSPECTOR
FOR THE YEAR
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THE RURAL DISTRICT COUNCIL OF ALTON

Chairman of the Council A. E. Guy, Esq.
Vice-Chairman A. B. Wright, Esq.

PUBLIC HEALTH COMMITTEE

Chairman of Committee E. H. Lucas, Esq.
Vice-Chairman Mrs. E. J. Champney.

MEMBERS

Lady Bonham-Carter	A. E. Guy, Esq.
J. Britton, Esq.	W. H. Ings, Esq.
W. Brock, Esq.	R. E. B. Meade-King, Esq.
W. H. Crispe, Esq.	Major A. E. Mentzel, M.B.E.
Commander L. Derek-Jones	Colonel C. Newton-Davis
J. Embleton, Esq.	A. B. Wright, Esq.

RURAL DISTRICT REPRESENTATIVES ON THE ALTON JOINT SLAUGHTERHOUSE COMMITTEE

Lady Bonham-Carter	A. E. Guy, Esq.
W. H. Crispe, Esq.	Capt. H. J. M. Holmes.

RURAL DISTRICT REPRESENTATIVES ON THE NO. 7 (ALTON) DISTRICT HEALTH SUB-COMMITTEE

Chairman of Sub-Committee Mrs. E. J. Champney.
Vice-Chairman Mrs. C. P. Thomson-Glover.

MEMBERS

Lady Bonham-Carter	Miss A. M. Littlejohn
The Hon. Mrs. T. Brand	Mrs. N. S. Ryder
Mrs. H. M. Cumberbatch	Countess of Selborne

PUBLIC HEALTH DEPARTMENT STAFF

Medical Officer of Health	- Randall Martin, M.B., Ch.B., D.P.H. (Resigned 18.4.56)
	- J. Coutts Milne, M.B., Ch.B., D.P.H., D.T.M. & H. (Appointed 9.7.56)
Chief Public Health Inspector and Building Surveyor	- A. E. Bennett, C.R.S.I., A.M. Inst.B.E.
Senior Additional Public Health Inspector	- J. H. Johnson, C.R.S.I., M.A.P.H.I.
Additional Public Health Inspector and Assistant Building Surveyor	- A. L. Wesley, C.R.S.I., M.R.S.H., M.A.P.H.I.
Clerks	- P. F. Mercer Miss F. M. Dunford

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ALTON RURAL DISTRICT COUNCIL

Barton End,
Lenten Street,
Alton, Hants.

September, 1957.

To the Chairman & Members of the Alton Rural District Council.
Ladies and Gentlemen,

I have the honour to present for your information and consideration the Annual Report for the year 1956, compiled according to the directions of the Minister of Health.

What I think will in retrospect be recognized as the outstanding health feature of 1956 was the poliomyelitis vaccination programme introduced by the Ministry of Health during May and June and which roused universal interest, both amongst the medical profession and the general public.

With the exception of the infant mortality rate which showed an increase, the other vital statistical figures are satisfactory, continuing to show the improvements to which we have become accustomed. The birth rate is higher and the death rate lower than in previous years. The incidence of most infectious diseases was low, measles and whooping cough in particular averaging less than one case a week.

Increasing use of mechanical hop-pickers is becoming a feature in the District and so the need for mass labour over a short period is diminishing and the camps which in the past have called for constant supervision have already become fewer and smaller. It is likely too that the notice "No Travellers" will soon no longer be seen in the windows of places of public resort. Undoubtedly from the public health point of view this form of automation is to be welcomed.

I am grateful to the Chairman and Members of the Public Health Committee for their encouragement and help; to Mr. Holden, Clerk of the Council; to Mr. Bennett, the Chief Public Health Inspector, and the Staff of the Public Health Department for their ready assistance, enabling me to carry out my duties.

I am also indebted to my predecessor, Dr. Randall Martin, for his kindly help when I took up my appointment.

(Signed) J. COUTTS MILNE.

Medical Officer of Health
Alton Rural District Council.

PART I

GENERAL REPORT OF THE MEDICAL OFFICER OF HEALTH

STAFF

Dr. Randall Martin vacated the appointment of Medical Officer of Health on 18th April, 1956, on being appointed Senior Medical Officer, Maternity and Child Welfare, Hampshire County Council.

Dr. J. Coutts Milne was appointed as his successor and took up his duties on 9th July, 1956.

During the interval Dr. Randall Martin acted as Interim Medical Officer of Health.

ALTON RURAL DISTRICT

The Alton Rural District, situated in North-East Hampshire, comprises twenty-one parishes and has its administrative centre in Alton. The District is essentially an agricultural one, well known for its hopfields, fruit and poultry farms.

The population of the District as estimated by the Registrar General for mid-1956 is 25,710. This shows an increase of 430 over the 1955 figure. The national increase of births over deaths amounted to 229.

BIRTH AND DEATH RATES

During the year there were 451 live births, giving a birth rate of 17.5 per 1,000 of the population. The comparability factor given by the Registrar General which when applied to the local rate gives a figure which can be compared with the rates for other areas is 1.16 for births, giving an adjusted rate of 20.3, which compares with the rate of 15.7 (provisional) for England and Wales as a whole. 32 illegitimate births were recorded, about 7% of total births, much the same figure as in 1955.

The 222 deaths give a crude death rate of 8.6 per 1,000 of the population. The comparability factor is 1.11 and this gives an adjusted rate of 9.5 which compares with that of 11.7 for England and Wales.

INFANT MORTALITY RATE

There were 13 deaths in children under one year, 8 of them being less than 4 weeks old. The infant mortality rate is 28.8 per 1,000 related births compared with 21.6 for the previous year and with a rate of 23.8 for England and Wales, the lowest ever recorded for the country. The relatively small numbers involved, however, render rate comparisons with other areas or earlier years misleading.

The still birth rate is 19.6 per 1,000 births (England and Wales 23.0). There was one death arising from childbirth, the first in the past three years.

CANCER

37 of the deaths in the District were recorded from cancer of various types, 18 were males and 19 females. It is pleasing to note that there were fewer deaths from cancer of the lungs and bronchus than in the previous two years, 7 as compared with 12 in 1955. Dr. Randall Martin's comments in last year's report, however, still hold good in regard to the problem of smoking and lung cancer. Evidence continues to accumulate of the increased risk of lung cancer in smokers. Smoking has also been incriminated as a factor in determining death from chronic bronchitis and in causing breakdown of inactive pulmonary tuberculosis among middle-aged and older men. The Parliamentary Secretary to the Ministry of Health recently made public certain information indicating the relative risk of lung cancer in smokers. Of life-long heavy smokers (about 25 cigarettes a day), one in ten could be expected to die of lung cancer before reaching the age of 75. Among heavy and continuous smokers (substantially more than 25 a day) the death rate from lung cancer was about 40 times that among non-smokers.

Some comment on such figures is, I think, called for, and in this connection I cannot do better than quote from a statement by the Council of the National Association for the Prevention of Tuberculosis (December, 1956) in which they state that although the essential cause of cancer has not yet been discovered, we must act on certain information available. "Those who smoke heavily should cut down on their smoking. Cigarette smoking is a habit better not started. It is worthwhile discouraging young people from ever smoking that first cigarette. By supporting mass radiography campaigns and encouraging friends and neighbours to have a chest X-Ray we can help to discover the disease early and treat it successfully".

INFECTIOUS DISEASES

GENERAL

As in the rest of England and Wales, the incidence of most infectious diseases in the District was relatively low. The chief feature of the returns for the country as a whole was the continual rise in the incidence of dysentery - the highest on record - and in which fortunately this District did not participate, and the continual fall in the incidence of diphtheria. Only 302 cases of diphtheria were notified in England and Wales, this number being less than half of the lowest weekly total in the pre-inoculation period.

MEASLES

There was a marked decrease in the number of notifications received, 47 compared with 432 in 1955. As the incidence of measles rises in alternate years the decrease is in consequence complementary to the large number of cases in 1955; 31 of the cases were in children under 10 years of age, only one case was under 1 year of age, and one was over 25 years old.

WHOOPIING COUGH

There was a considerable decrease in the number of cases of whooping cough reported - 43 compared with 74 in 1955. Most of the cases occurred during the third and fourth quarters of the year. All the cases were in children under the age of 9, except one aged 11 years; 6 were in infants under 1 year. The majority of the cases occurred in Bordon and the surrounding district.

SCARLET FEVER

During the year 17 cases of scarlet fever were reported, a considerable increase over the previous two years - 6 in 1955 and 11 in 1954. Seven of the cases occurred in the first quarter of the year, one in the second quarter, three in the third quarter, and six in the fourth quarter. Most of them were in children aged between 5 and 7 years, the youngest was 2 years and the oldest 11 years. The cases were scattered throughout the District; the most in any one parish being 4 in Froyle. All the cases were mild in type. The 17 cases give an incidence rate of 68 per 100,000 of the population, which can be compared with that of 73 per 100,000 for England and Wales in 1955. In this country at one time scarlet fever was a leading cause of death amongst the infectious diseases of children but since 1870 the disease has become progressively milder and today it is almost a trivial disease.

POLIOMYELITIS

No case of poliomyelitis was reported during the year. The only action called for was in July when observation was kept on a number of school children, contacts of a case which occurred at a residential private school in Surrey.

On the 19th January a Ministry of Health circular announced that a certain amount of poliomyelitis vaccine was expected to be ready in May and June. It was offered on a voluntary basis to children born between 1947 and 1954 who had been registered for this purpose by April. As there was not enough vaccine for all the children who had registered, children were selected according to a centrally determined plan designed to maintain an even spread throughout the eligible age groups based on the month of birth. In the whole country about two million children were registered and some three to four hundred thousand were vaccinated. In this District the response was small and fourteen children received the vaccine given in two injections at four weeks' interval. A number of problems in the prevention of poliomyelitis still remain unanswered, one in particular being how long the protective effect of the vaccine will last.

OTHER INFECTIOUS DISEASES

Only one case each of Sonne dysentery and of food poisoning were reported. Three cases each of erysipelas and puerperal pyrexia were notified, and four cases of pneumonia.

TUBERCULOSIS

Nine new cases of pulmonary tuberculosis were notified during the year, five males and four females.

There was only one case of non-pulmonary tuberculosis.

The age and sex distribution of the cases notified is:-

<u>Age</u>	<u>Pulmonary</u>		<u>Meninges & C. N. S.</u>		<u>Other</u>	
	M.	F.	M.	F.	M.	F.
5 - 14	-	-	-	-	-	1
15 - 24	2	1	-	-	-	-
25 - 44	1	-	-	-	-	-
45 - 64	2	1	-	-	-	-
65 & over	-	2	-	-	-	-
Totals:-	9		0		1	

In May the Southampton Mass Radiography Unit visited Alton and I am indebted to the Medical Director for the following information:-

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Total number attended for X-Ray:-	1081	1316	2397
Newly discovered cases of pulmonary tuberculosis:-	3	-	3
<u>Assessment of Cases</u>			
Recommended for			
(a) Occasional supervision	2	-	2
(b) Immediate treatment	1	-	1

Incidence - 0.41 per 1,000 examinees.

PROPHYLACTIC IMMUNISATION SCHEMES

With certain exceptions the incidence of many infectious diseases in the country has been greatly reduced or even eliminated, and this has resulted in more problems for public health. Artificial immunity has become of increasing importance. An immense reduction in the incidence of diphtheria in the country has followed the general immunisation of infants and young children; even in 1948 there were 3,575 cases and 156 deaths, whilst in 1956 there were only 302 cases. In this District no case has occurred in the past ten years. In order to eradicate the disease it is considered necessary to secure the immunisation of not less than 75% of babies before their first birthday. With this end in view in this District the parents of every child are contacted when the

child is four months old and again at five years old and ten years old, and they are invited to have their children immunised either by their own doctor or at clinics. In 1956 53% of babies in the District were immunised before their first birthday.

Multiple immunisation is now coming into more general use. In May, 1955, a combined scheme of diphtheria and whooping cough immunisation started - this is now the most favoured type of immunisation. In 1956 the County Council made provision for the use of a triple antigen to protect against diphtheria, whooping cough and tetanus. The number of children protected during 1956 is shown in the following table:-

(I) Number of children who completed a course of primary immunisation and who received reinforcing injections.								
Ages	Diphtheria only		Diphtheria & Whooping Cough		Whooping Cough only		Triple Antigen	
	Prim	Bstr	Prim	Bstr	Prim	Bstr	Prim	Bstr
Under 1	9	-	208	-	-	-	113	-
1 - 4	23	12	136	9	1	1	75	6
5 - 14	90	765	11	29	1	-	4	19
Totals:	122	777	355	38	2	1	192	25
Totals for 1955:	170	71	184	7	3	-	-	-

A comparison with the 1955 figures shows that many fewer injections were given for primary diphtheria immunisation in 1956, with a marked increase in combined and triple immunisations.

To assess the extent to which children in this area have been protected, the proportion of children of each age who have received at some time or other a course of injections against diphtheria as well as the ages at which the course was received must be taken into consideration. Therefore, the immunisation state is shown in the following table by (a) age at inoculation, and by (b) age attained:-

(II) Number of children at 31.12.56 who had completed a course of immunisation at any time between 1.1.42 and 31.12.56.					
Age at 31.12.56, i.e. born in year	Under 1 1956	1-4 52-55	5-9 47-51	10-14 42-46	Total under 15 yrs
Last complete course of injections 1952-56.	79	1137	1708	1096	4020
1951 or earlier.	-	-	889	2031	2920
Totals:-	79	1137	2597	3127	6940

VACCINATION

It is pleasing to be able to record that the state of primary infant vaccination in the District is relatively good. A total of 302 babies under twelve months of age were vaccinated. There were 451 births during the year so that the equivalent of 67% of the children born were vaccinated.

The following table gives details of the age groups:-

Age at which vaccinated.	Primary Vaccinations.	Re-vaccinations
Under 1 year	302	-
1 - 4 years	58	26
5 - 14 years	24	52
15 years and over	21	99
Totals:-	405	177

NATIONAL ASSISTANCE ACT, 1948 (Section 47)

One case which might eventually have called for action under Section 47 came to notice. An elderly lady, unable to look after herself adequately and who refused any offer of help, having been brought up in the tradition of placing a high value on independence and so not finding it easy to accept dependence, only doing so when the end was near. It is not easy to hold the balance between the importunity of the relatives who call for action and one's feeling that it may often be kinder to allow an old person to remain in his or her own home, poor and squalid though it may be.

This case reminded me of the novelist James Hanley's excellent description in the "Anatomy of Llangyllwch" of the stubbornness and misguided independence of an old man living alone in a tiny house - one up and one down - whom the world had rolled past and who likewise refused to be helped.

RURAL AMENITIES

It is well to be reminded at times of the needs of those who live outside the towns and in this connection it is, I think, worth at least glancing through a publication entitled "Our Villages", a survey of amenities and public services in rural areas of England carried out in 1956 by the National Federation of Women's Institutes. An interesting list is given of improvements needed in order of preference, headed by sewerage, street lighting, better 'bus services, 'bus shelters, water, footpaths. Housing came well down the list as item 17, with public lavatories as item 13 and refuse collections as item 14. The report, the third of a series organised at six yearly intervals, shows how the needs of the villages have altered since 1944; the demand for piped water has been met to a great extent but provision of main sewerage has been much slower.

People are now much more alive to the problem of road safety, hence the emphasis on street lighting and footpaths. The comments on rural schools are enlightening and applicable, particularly in regard to sanitation, I think, to quite a number of schools in our District. Overcrowding, inadequate buildings, old and unhygienic sanitation are the terms of complaint used.

I would not be so bold as to attempt to give a form of priority of rural needs apart from stressing the high priority of certain basic requirements which should be our aim - the provision of a piped supply of main water to every house, with a bathroom and adequate supply of hot and cold water, the abolition of the pail closet and the elimination of 'sub-standard housing.

PROVISION OF GENERAL HEALTH SERVICES OF THE AREA

Since 1954 there has been in the county a scheme of devolution to District Health Sub-Committees of certain functions of the National Health Service Act, 1946.

Membership of the No. 7 (Alton) District Health Sub-Committee is as follows:-

Chairman of Sub-Committee ... Mrs. E. J. Champney
Vice-Chairman Mrs. C. P. Thomson-Glover

MEMBERS

Alton Rural District Council Representatives

Lady Bonham-Carter	Miss A. M. Littlejohn
The Hon. Mrs. T. Brand	Mrs. N. S. Ryder
Mrs. H. M. Cumberbatch	Countess of Selborne

Alton Urban District Council Representatives

Mrs. C. Kerridge Mrs. C. Harckham

Nursing Association Representatives

Mrs. G. Coke (Bentley)
Mrs. I. M. Durham (Grayshott)

Special Nominees

The Hon. Mrs. V. L. Gilmour,
O.B.E., T.D.
(Medstead)
Mrs. H. H. Sheldon
(Alton)

County Council Representatives

Brigadier E. W. Rogers
Lieut-Col. R. M. Digby

British Medical Association

Dr. A. F. Goode.

AMBULANCE FACILITIES

The Ambulance Service is conducted by the County Council who supply monthly details of journeys to the Public Health Committee. The ambulances for the area are stationed at Alton.

Applications for the use of ambulances are made to:-

The Aldershot Ambulance Station,
(Telephone:- Aldershot 2244)

CHILD WELFARE

Child Welfare Centres are situated throughout the District at the following places and on the dates and times given. These centres are for the attendance of mothers and babies, and children under five. Activities at the clinics, at which a doctor and nurse attend, include advice on feeding and child management, immunisation, weighing and the distribution of welfare foods and certain medicaments.

Centres for children under the age of 5 years are available as follows:-

<u>Centre</u>	<u>Address</u>	<u>Day of clinic per month</u>	<u>Time</u>
Alton	Assembly Rooms	Every Tuesday	2-4 p.m.
Bentley	Memorial Hall	3rd Wednesday	2-4 p.m.
Binsted	Institute	4th Wednesday	2-4 p.m.
Bordon	Military Welfare Centre	1st and 3rd Thursdays	2.45 - 4 p.m.
Four Marks	Institute	1st and 3rd Wednesdays	2-4 p.m.
Froyle	Methodist Hall	1st Wednesday	2-4 p.m.
Grayshott	Village Hall	1st Friday	2-4 p.m.
Headley	Village Hall	2nd & 4th Fridays	2-4 p.m.
Kingsley	Cadet Hut	3rd Friday	2-4 p.m.
Longmoor	Military Welfare Centre	2nd Monday	2-4 p.m.
Oakhanger	Village Hall	3rd Friday	3-4 p.m.
Selborne	Village Hall	2nd Wednesday	2-4 p.m.
Whitehill	Men's Club	2nd and 4th Thursdays	2-4 p.m.

NATIONAL WELFARE FOODS

National Welfare Foods are distributed from the following centres in the Alton Rural District:-

<u>Centre</u>	<u>Time of Opening</u>
BENTLEY: Bentley Post Office, London Road.	Business hours.
BENTLEY: Child Welfare Centre, Memorial Hall.	3rd Wednesday in month from 2 p.m.
BINSTED: Child Welfare Centre, The Institute.	4th Wednesday in month from 2 p.m.
BORDON: Child Welfare Centre, Medical Inspection Room, The Barracks.	Every Thursday from 2 p.m.
EAST TISTED: Mr. Budd, The Stores.	Business hours.
FARRINGDON: Messrs. W. & L. Burr, Stores & Post Office.	Business hours.
FOUR MARKS: Mr. Tomlinson, The Post Office.	Business hours.
FROYLE: Child Welfare Centre, Methodist Church School.	1st Wednesday in month from 2 p.m.
GRAYSHOTT: Child Welfare Centre, Village Hall.	1st Friday in month from 2.30 p.m.
HEADLEY: Child Welfare Centre, Village Hall.	2nd and 4th Fridays in month from 2 p.m.
KINGSLEY: Child Welfare Centre, Cadet Hut.	3rd Friday in month from 2-2.45 p.m.
LASHAM: Mrs. Pearce, The Post Office.	Business hours.
LINDFORD: Mr. Pears, Cross Road Store.	Business hours.
LONGMOOR: Child Welfare Centre, Medical Inspection Room, The Barracks.	2nd and 4th Mondays in month from 2.30 p.m.
MEDSTEAD: Women's Institute.	Every Monday 2.30 p.m. to 4 p.m.
OAKHANGER: Child Welfare Centre, Village Hall.	3rd Friday in month from 3-4 p.m.
ROPLEY: Mrs. Knowles, Coffee Rooms.	1st Friday in month from 2-4 p.m.
SELBORNE: Child Welfare Centre, Village Hall.	2nd Wednesday in month from 2 p.m.
WEST TISTED: Mr. Bayley, Post Office Stores.	Business hours.
WHITEHILL: Child Welfare Centre, Men's Club.	2nd and 4th Thursdays in month from 2 p.m.
WIELD: Mrs. G. J. Baker, 2 Manor Farm Cottages, Upper Wield.	By arrangement.

HEALTH VISITING

The following are the Health Visitors and the areas which they serve:-

<u>Name</u>	<u>Address</u>	<u>District</u>
Mrs. J. E. Morrow.	13 Whitedown, Alton. (Phone: Alton 2097)	Alton, Holybourne, Chawton, Farringdon.
Miss A. M. Knapp.	161a London Road, Holybourne. (Phone: Alton 2829)	Bentley, Froyle, Rowledge, Blackmoor, Binsted, Worldham, Headley, Kingsley.
Miss V. Gawthorp.	No. 1 Bungalow, Infant Welfare Centre, Bordon. (Phone: Bordon 369)	East Tisted, Grayshott.
Miss I. K. Brown.	No. 2 Bungalow, Infant Welfare Centre, Bordon. (Phone: Bordon 292)	Whitehill, Bordon, Longmoor.
Miss E. M. May.	Nurse's Bungalow, 22 Gosling's Croft, Selborne. (Phone: Selborne 219)	Selborne, Blackmoor, Newton Valence, Oakhanger.
Miss B. B. Reynolds.	Adbeji, Hattingley Road, Medstead. (Phone: Medstead 3192)	Ropley, Medstead, Four Marks, Wield, Bentworth & West Tisted.
Miss D. McKenzie.	c/o Hampshire County Council Health Centre, Bramblys Grange, Basingstoke. (Phone: Basingstoke 1877)	Lasham, Shalden.

HOME HELP SERVICE

A scheme of domestic help is available. The helpers are experienced women carefully chosen for their suitability for the work. They will run the home carefully, their job being to take over the housewife's work.

Home Helps are available for the following types of cases:- when the housewife is sick or has to have an operation; when a new baby is expected; when several members of a household are ill at one time; and to give help to the elderly and infirm.

Application for a Home Help, accompanied by a medical certificate, should be made to the District Organiser. The charge depends on the hours worked and the income of the family after certain allowances have been made.

Division VI includes the Rural District of Alton and the Divisional Organiser now has her office at the Town Hall, Petersfield. (Telephone No:- Petersfield 771/773 - Ext. 18), to whom application should be made for a Home Help.

LABORATORY FACILITIES

Bacteriological examinations of clinical matter (sputum, swabs etc.) and of water, milk and foodstuffs are carried out at the Public Health Laboratory, Royal Hampshire County Hospital, Winchester.

Chemical analyses of water, sewage, milk and other samples are carried out by arrangement with the Public Analyst, Portsmouth.

Thanks are expressed to the Director of the Public Health Laboratory Service and the Public Analyst, Portsmouth, for their ready advice and assistance granted during the year.

ANTE-NATAL CLINICS

Clinics are held every Thursday at Alton General Hospital and at the Ante-natal Clinic, Whitehill.

The Medical Officers attending the Alton Clinics at the end of the year were as follows:-

1st Thursday	-	Drs. W. S. Larcombe & E. P. H. Shortt.
2nd Thursday	-	Dr. T. C. Wilson.
3rd Thursday	-	Dr. Helen E. Larcombe.
4th Thursday	-	Dr. A. F. Goode.

SCHOOL HEALTH SERVICES

Clinics are held as follows:-

Orthopaedic	-	Lord Mayor Treloar Hospital.
Ear, nose and throat	-	Alton General Hospital.
Dental	-	At Schools.
Ophthalmic and orthoptic	-	Alton General Hospital.
Child guidance	-	Health Centre, Winchester.
Speech therapy	-	Alton General Hospital.

TUBERCULOSIS

Clinics are held at Aldershot, Basingstoke and Winchester, whilst sanatoria are available at Bishopstoke, Chandler's Ford, Liphook and Alton (Henry Gauvain Hospital and Lord Mayor Treloar Hospital).

VENEREAL DISEASES

Clinics are held at Aldershot and Winchester.

AREA WELFARE OFFICER

The Area Welfare Officer is Mr. C. Hemsley, whose office is at Manor Park House, Aldershot. (Telephone No:- Aldershot 2341).

His assistant is Mr. P. H. Dean, County Council Health Centre, Bramblys Grange, Basingstoke. (Telephone No:- Basingstoke 934).

MIDWIFERY AND HOME NURSING

These services are administered as follows:-

District served.	Nurse.	Service given
Alton Chawton Farringdon East Tisted	Mrs. M. A. Staples, S.R.N., S.C.M., Gas/Air. 6 Edward Road, Alton. (Tele: Alton 2379) (Appointed 1.1.56)	Midwifery & general nursing.
Bentley Froyle Binsted Holybourne E. & W. Worldham	Miss M. Poole, S.R.N., S.C.M., Q.N. 10 Babs Field, Bentley. (Tele: Bentley 3158)	Midwifery & general nursing.
Grayshott Headley Down Headley Common Barford, Hearn, Bramshott Chase	Miss M. A. Cuff, S.C.M., Gas/Air. Nurse's Cottage, School Road, Grayshott. (Tele: Hindhead 409)	Midwifery & general nursing.
Headley Arford Lindford Deadwater Standford Wishanger Bordon Bordon Camp	Mrs. D. E. Stephens, S.R.N., S.C.M. 57 Church Fields, Headley. (Tele: Headley Down 2158) (Appointed 7.11.56)	Midwifery & general nursing.
Medstead Bentworth Shalden Lasham Four Marks	Miss J. M. Young, S.R.N., S.C.M. 3 Green Stile, Medstead. (Tele: Medstead 2100) (Appointed 23.6.56)	Midwifery & general nursing.
Ropley (included in area of nurse for Bramdean, Winchester RDC)	Miss V. Douglas, 16 Woodlane Close, Bramdean. (Tele: Bramdean 240)	Midwifery & general nursing.
Selborne Empshott Hartley Mauditt Newton Valence Oakhanger Blackmoor Whitehill (South)	Miss E. M. May, S.R.N., S.C.M., H.V.Cert. 22 Gosling's Croft, Selborne. (Tele: Selborne 219)	Midwifery & general nursing & health visiting.

PART II

STATISTICAL TABLES

(Table 1)

STATISTICS OF THE AREA

As at 31st December, 1956.

Area, in acres	..	..	..	..	..	..	..	65,526
Total estimated home population (including military)	..	..	..	..	..	..	..	25,710
Number of inhabited houses	..	..	..	..	..	..	..	6,340
Rateable value	..	..	..	..	..	..	..	£283,998
Product of the penny rate 1955-56	..	..	..	..	..	..	..	£710
Estimated product of the penny rate 1956-57	..	..	..	..	..	..	..	£1,160

VITAL STATISTICS

(Table 2)

B I R T H S

Total Population		1952	1953	1954	1955	1956
		25,330	25,080	24,690	25,280	25,710
Live Births Legitimate	Male	200	209	215	191	217
	Female	221	210	201	198	202
	Total	421	419	416	389	419
Live Births Illegitimate	Male	13	20	14	14	14
	Female	16	19	17	13	18
	Total	29	39	31	27	32
Total Live Births		450	458	447	416	451
Live Birth Rate per 1,000 Total Population		17.8	18.3	18.1	16.5	17.5
England and Wales		15.3	15.5	15.2	15.0	15.7

Still Births Legitimate	Male	6	3	6	3	3
	Female	4	8	3	5	5
	Total	10	11	9	8	8
Still Births Illegitimate	Male	0	0	0	0	0
	Female	0	0	0	0	1
	Total	0	0	0	0	1
Total Still Births		10	11	9	8	9
Still Birth Rate per 1,000 Births (Live & Still)		22.2	24.2	19.7	18.9	19.6

Comparability Factor is 1.16, so the adjusted Birth Rate for this District is 20.3 which is the figure for comparative purposes with England and Wales.

VITAL STATISTICS

(Table 3)

D E A T H S

From all causes		1952	1953	1954	1955	1956
	Male	123	117	128	133	120
	Female	100	104	104	106	102
	Totals	223	221	232	239	222
Death Rate per 1,000 total population		8.8	8.8	9.4	9.5	8.6
Average for England & Wales total population		11.3	11.4	11.3	11.7	11.7

The Death Rate Comparability Factor for this District is 1.11, allowance thus being made for local differences in the sex and age distribution of the population.

The adjusted Death Rate for this area is, therefore, 9.5.

VITAL STATISTICS

(Table 4)

INFANT MORTALITY

Deaths under 1 year of age. (legitimate)		1952	1953	1954	1955	1956
	Male	3	2	8	6	7
	Female	2	3	4	3	6
Deaths under 1 year of age. (illegitimate)	Male	0	0	0	0	0
	Female	1	1	0	0	0
Totals:-		6	6	12	9	13
Infant Mortality Rate per 1,000 live births.		13.3	13.3	26.8	21.6	28.8
England & Wales Rate per 1,000 live births.		27.6	26.8	25.5	24.9	23.8

NEO-NATAL MORTALITY

Number of Deaths of infants under 4 weeks of age. (legitimate)		1952	1953	1954	1955	1956
	Male	2	2	1	3	4
	Female	2	3	2	1	4
	Totals	4	5	3	4	8

Attention is drawn to the fact that these rates for the Rural District owing to the small numbers involved are not statistically significant and rate comparisons with other areas or earlier years is misleading.

(Table 5)

ANALYSIS OF CAUSES OF DEATH

Diseases		Male	Female	Total
1.	Tuberculosis, respiratory ..	0	0	0
2.	Tuberculosis, other ..	0	0	0
3.	Syphilitic disease ..	0	0	0
4.	Diphtheria ..	0	0	0
5.	Whooping Cough ..	0	0	0
6.	Meningococcal infections ..	0	0	0
7.	Acute poliomyelitis ..	0	0	0
8.	Measles ..	0	0	0
9.	Other infective and parasitic diseases ..	3	1	4
10.	Malignant neoplasm, stomach ..	7	1	8
11.	Malignant neoplasm, lung, bronchus ..	6	1	7
12.	Malignant neoplasm, breast ..	0	2	2
13.	Malignant neoplasm, uterus ..	0	0	0
14.	Other malignant & lymphatic neoplasms ..	5	15	20
15.	Leukaemia, Aleukaemia ..	3	1	4
16.	Diabetes ..	0	1	1
17.	Vascular lesions of nervous system ..	14	16	30
18.	Coronary disease, angina ..	14	14	28
19.	Hypertension with heart disease ..	0	3	3
20.	Other heart diseases ..	21	19	40
21.	Other circulatory disease ..	4	3	7
22.	Influenza ..	1	0	1
23.	Pneumonia ..	5	8	13
24.	Bronchitis ..	4	1	5
25.	Other diseases of respiratory system ..	0	0	0
26.	Ulcer of stomach and duodenum ..	2	1	3
27.	Gastritis, Enteritis and Diarrhoea ..	0	0	0
28.	Nephritis and Nephrosis ..	2	0	2
29.	Hyperplasia of Prostate ..	2	0	2
30.	Pregnancy, Childbirth and Abortion ..	0	1	1
31.	Congenital malformations ..	4	2	6
32.	Other defined and ill-defined diseases ..	11	10	21
33.	Motor vehicle accidents ..	4	2	6
34.	All other accidents ..	7	0	7
35.	Suicide ..	1	0	1
36.	Homicide and operations of war ..	0	0	0
All causes		120	102	222

(Table 6) THE SEX AND AGE DISTRIBUTION OF DEATHS

Age	Male.	Female.
Under 1 year	7	6
1 - 9 years	1	3
10 - 19 years	3	0
20 - 29 years	7	2
30 - 39 years	2	2
40 - 49 years	6	3
50 - 59 years	16	7
60 - 69 years	17	21
70 - 79 years	34	27
80 - 89 years	26	23
90 - 99 years	3	8
	120	102
Total:-	222	

(Table 7)

PREVALENCE OF INFECTIOUS DISEASES

The following is an analysis of the infectious diseases which were notified during the year, with the four preceding years for comparison:-

Disease	Totals for				
	1952	1953	1954	1955	1956
Scarlet Fever	15	26	11	6	17
Whooping Cough	69	115	75	74	43
Acute poliomyelitis (paralytic)	4	3	0	1	0
Acute poliomyelitis (non-paralytic)					
Measles	233	329	144	432	47
Diphtheria	0	0	0	0	0
Acute pneumonia	10	14	26	8	4
Dysentery	0	0	0	1	1
Typhoid & para- typhoid fever	0	0	0	0	0
Erysipelas	1	2	0	0	3
Meningococcal infection	0	0	1	0	0
Meningitis, unspecified	0	0	1	0	0
Food poisoning	0	1	0	6	1
Puerperal pyrexia	1	2	1	2	3
Ophthalmia neonatorum	0	0	0	1	0
Totals:-	333	492	259	531	119

THE RURAL DISTRICT OF ALTON

A N N U A L R E P O R T

OF THE

CHIEF PUBLIC HEALTH INSPECTOR

AND

BUILDING SURVEYOR

FOR THE YEAR

1956

S A N I T A R Y C I R C U M S T A N C E S

O F T H E A R E A

REPORT OF
THE CHIEF PUBLIC HEALTH INSPECTOR
AND
BUILDING SURVEYOR.

1956.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

There are piped main supplies in every Parish of the District. These supplies, from the Wey Valley Water Company and the Mid Wessex Water Company have been satisfactory throughout the year both in regard to quantity and quality.

Samples of water from the main supplies are regularly taken, for analysis, by the Water Undertakers themselves.

Other domestic supplies in the District are from wells, springs and underground rain water storage tanks, from which samples for analysis were taken during the year as follows:-

For bacteriological analysis..... 31.

Results: - unsatisfactory..... 7
 satisfactory.....24.

With regard to the above 7 unsatisfactory samples, 5 properties were subsequently connected to the main supplies and the remaining 2 properties are no longer occupied.

The Bordon and Longmoor Military Camps in the Parish of Whitehill, including approximately 550 married quarters, are supplied by the War Department via their own mains.

The following indicates the number of properties and the approximate population in each Parish served by main water: -

PARISH	AREA (acres)	No. OF HOUSES	HOUSES SUPPLIED	ESTIMATED POPULATION SUPPLIED
Bentley	2483	260	255	765
Bentworth	3763	197	172	516
Binsted	7799	515	361	1083
Chawton	2194	149	91	273
East Tisted	2621	71	44	132
Farringdon	2105	172	138	414
Four Marks	1502	468	375	1125
Froyle	4641	226	213	639
Grayshott	901	461	429	1287
Headley	4771	938	793	2379
Kingsley	1540	141	112	336
Lasham	1797	46	44	132
Medstead	2809	439	280	840
Newton Valence	2069	87	38	114
Ropley	3704	424	259	777
Selborne	4830	366	272	816
Shalden	2160	127	109	327
West Tisted	2356	65	31	93
Whitehill	5509	1004	814	2442
Wield	2104	71	57	171
Worldham	3868	113	102	306
Totals	65526	6340	4989	14967

DRAINAGE

Connection of domestic premises to the Council's sewers continued satisfactorily during the year.

In the Whitehill area, 29 new connections were made, making a total of 307 properties connected. In addition, all the Council's 352 properties are connected.

In the Holt Pound area, a further 2 private connections were made, making a total of 52 in all.

Work on the scheme for the sewerage of the Parish of Headley commenced towards the end of the year and progressed satisfactorily.

In addition to the number of properties installing domestic drainage with connection to the Council's sewers, there was an increase in the number of new septic tank installations.

HOUSING ACTS.

Number of houses demolished as
a result of formal procedure..... 8.

Number of houses demolished by
owners voluntarily..... 3.

Number of houses rendered fit
as a result of formal action..... 4.

Number of houses rendered fit
as a result of informal action..... 16.

RURAL HOUSING.

The following shows the number, etc., of
houses dealt with since the Housing Act 1949 came into
force, with respect to improvement grants: -

	1950	1951	1952	1953	1954	1955	1956	Total
Number of formal approvals granted.	2	1	0	3	23	39	21	89
Number of indivi- dual properties in approved applications.	3	1	0	5	38	59	33	139
Number of indivi- dual properties in completed schemes.	0	2	1	2	3	62	45	115
Amount of grant approved.	£ 733	£ 289	-	£1630	£7547	£14375	£ 8735	£53309
Average grant per house.	£244	£289	-	£326	£198	£243	£265	£239

MOVEABLE DWELLINGS.

During the year 18 new licences were issued
for moveable dwellings, the position at the end of the year
being as follows: -

For sites - 9 licences in respect of 52 dwellings,
1 licence in respect of 50 dwellings for holidays
and week ends only.

Individual - 48 licences in respect of 48 dwellings.

Total - 58 licences in respect of 150 dwellings.

Visits were made regularly to all the above
to ensure the maintenance of sanitary conditions.

INSPECTION AND SUPERVISION OF FOOD.

There are no private slaughterhouses in the District. The Alton Rural and Urban District Councils combined to provide a public slaughterhouse which came into use on 5th July 1954 but which reverted to private ownership in October 1955.

Regular slaughtering takes place at the above mentioned premises and all animals slaughtered were inspected by public health inspectors of the Rural and Urban District Councils, working alternate weeks.

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The following foodstuffs were inspected in shops and stores and surrendered for condemnation: -

Meat	20 tins.
Vegetables	9 tins.
Fish	3 tins.
Milk	2 tins.
Soup	2 tins.
Fruit	1 tin.
Cream	1 tin.
Bacon	80 lbs.

- - - - -

Thirty-three food premises are registered under Section 16 of the Food and Drugs Act, 1955, (sale of ice cream, etc.).

- - - - -

There are no ice cream manufacturers in the District and no clean food organisation exists.

- - - - -

FOOD AND DRUGS ACT, 1955.

This Act came into operation on 1st January 1956, consolidating previous legislation.

Regulations made under this Act as to food hygiene also came into operation on 1st January 1956, taking the place of Section 13 of the Food and Drugs Act, 1938, as regards rooms in which food is handled and adding a number of new provisions in respect of the hygienic handling of food and the construction and maintainance of premises, stalls, vehicles, etc. where food is handled.

FOOD HYGIENE REGULATIONS, 1955.

A memorandum on the provisions of the above was circulated to the occupiers of all food premises in the District and inspections were made, commencing with cafes and restaurants.

Generally speaking, all premises inspected complied with the requirements of the Regulations except in minor respects and full compliance was obtained by informal action.

The aged occupiers of one tea-rooms decided to discontinue business rather than install the necessary fittings, etc. to comply with the Regulations.

Another cafe required repeated visits to ensure the acquisition and maintainance of a satisfactory standard.

One cafe proved a problem until a change of ownership when great improvements were obtained.

The owner of a temporary grocery shop commenced construction of new permanent premises.

One bakehouse was voluntarily closed and a new one built on modern lines in replacement.

There is one caravan snack bar which is excellently maintained.

Visits were made to all school kitchens which generally were satisfactory. Reconstruction of three school kitchens were commenced during the year.

The number of food premises in the area are as follows:-

Bakehouses	5.
Bakers' shops	1.
Butchers	14.
Cafes	15.
Chemists	3.
Clubs	17.
Confectioners	5.
Fishmongers	2.
Food warehouses (wholesale) . . .	1.
General stores	70.
Greengrocers	3.
Hotels	2.
Public houses	45.
School kitchens	21.
Wine merchants	2.
Dairies	3.
Sweet factory	1.
Mobile canteen	1.

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Sampling of food for adulteration is carried out by the Hampshire County Council as Food and Drugs Authority and I am indebted to Mr. C.O. Perry, Chief Inspector, Weights and Measures, Hampshire County Council for the following information which he has supplied: -

3 samples of butter and other fats	= genuine.
2 samples of drugs	= genuine.
7 samples of sausage meat and fish products	= genuine.
4 samples of spirits	= genuine.
8 samples other foods	= genuine.

As regards milk, 61 samples were taken for analysis with the following results; -

ordinary milk - 34 samples - satisfactory,
average 3.57% fat and
8.68% solids not fat.

Channel Island milk - 26 samples - satisfactory,
average 4.65% fat and
9.07% solids not fat.

Channel Island milk - 1 sample - unsatisfactory,
3.70% fat and
8.50% solids not fat.

A follow up sample of the unsatisfactory one was taken and found to be satisfactory. A caution was given to the retailer.

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MILK.

All milk sold in the District is now pasteurised, sterilised or tuberculin tested. The following shows the number of designated milk licences granted during the year by the Council: -

Pasteurised Milk.

Pasteurising licences	0.
Dealers' licences	5.
Supplementary licences	5.

Sterilised Milk.

Steriliser' licences	0.
Supplementary licences	3.

Tuberculin Tested Milk.

Dealers' licences	3.
Supplementary licences	6.

- - - - -

Forty-four samples of milk were taken by the Public Health Inspectors and submitted for examination by the Public Health Laboratory for efficiency of pasteurisation. All samples were found satisfactory.

- - - - -

PETROLEUM ACTS.

Seventy seven licences were issued during the year for the storage of petroleum spirit.

All new installations were inspected and routine visits made to all others.

HOP PICKERS ACCOMMODATION.

A radical change took place during the year when 4 growers installed the first picking machines in the District, resulting in a sharp decrease in the number of pickers and consequently huts used.

Of the 18 hop growers, 3 ceased growing hops after the 1955 season and the pickers' huts were converted into store buildings.

During the 1956 season, 11 hutted encampments and 4 tented encampments for travellers were in use, a decrease of 7 hutted encampments and 3 tented encampments.

All the above in use were inspected before, during and after occupation.

PREVENTION OF DAMAGE BY PESTS ACT 1949.

The Council's rodent operator during the year carried out general inspections and treatments throughout the District as follows: -

	Type of property.				
	Council	Private	Farms	Other	Total
Number of properties in district.	9	5993	350	237	6589
Number of properties inspected.	9	253	350	67	679
Number of properties infested.	5	67	172	9	253
Number of properties treated.	5	67	-	-	72

NOTES: - Council houses are included under column - "private".

Disinfestations on properties not treated by the Local Authority are carried out by the occupiers upon advice from the rodent operator or by contract with commercial undertakings.

The above figures relate to the number of properties inspected and/or treated and not to the number of inspections or visits made which were as follows: -

Council properties	104 visits.
Dwelling houses (private)	330 visits.
Agricultural premises	645 visits.
Business and other premises	66 visits.

Total number of visits 1145.

The Council were without a rodent operator from 29th August to 5th November and from 15th December to the end of the year.

FACTORIES ACTS 1937 and 1948.

The following particulars are those prescribed on the administration of the above Acts: -

Inspections for purposes of provisions as to health.

Premises	Registered.	Inspections.
Factories in which Sections 1/4 & 6 are to be enforced by Local Authorities.	9	5
Factories not included in above in which Section 7 is enforced by Local Authorities.	49	37
Other premises in which Section 7 is enforced by Local Authorities, excluding out workers premises.	61	61

Written notices were served in respect of the following: -

Want of cleanliness 1.
Insufficient sanitary accommodation . . 0.
Defective sanitary accommodation . . . 3.

BUILDING BYELAWS AND PLANNING.

The total number of plans deposited with the Council during the year was as follows: -

New dwellings 61
Alterations and additions 86
Conversions and adaptations 9
Domestic garages 48
Domestic drainage 84
Farm and other buildings 33
Sheds and stores 9
Planning only 206

Total number of plans 536.

The number of new dwellings erected by private enterprise during the year was 61.

There are 24 temporary building licences in force (none issued during the year). These buildings are all regularly inspected.

I am indebted to the Council's Engineer, Mr. John Blackwell, M.I.Mun.E., Chartered Municipal Engineer, for the following information with respect to Local Authority housing, sewerage and public cleansing.

Public cleansing was transferred from the Public Health Department to the Engineer's Department during 1954.

HOUSING

The number of dwellings provided by the Council as at 31st December 1956 was as follows: -

Pre-war dwellings, permanent,.....	62
Post-war temporary bungalows	116
Post-war dwellings, permanent,	698
	<hr/>
Total	876
	<hr/>

During the year, 74 new permanent Council houses were completed.

SEWERAGE

Part of the Parish of Bentley is sewered, the effluent being treated by broad land irrigation.

The Holt Pound area of the Parish of Binsted is sewered, the sewers connecting up to the system of the Farnham Urban District Council for treatment.

The greater part of the Parish of Whitehill is sewered, with discharge into treatment works at Lindford. These works also receive sewage from Bordon Military Camp.

An extension from the Whitehill sewers serves the Council's housing estate at Headley.

Work continued during the year on the scheme for the sewerage of the Parish of Headley, which sewers will also discharge into the treatment works at Lindford.

Generally, the larger Council housing estates where sewers are not available are provided with estate treatment works.

Sewage was received and treated at the works at Lindford at the rate of an estimated average flow of 400,000 gallons per day.

PUBLIC CLEANSING.

A general scheme of full refuse collection operates throughout the District.

Weekly collections are made in the Parishes of Grayshott and Whitehill, the remainder being served fortnightly.

The Council also undertake a weekly collection of refuse from married quarters in the Bordon and Longmoor Military Camps together with regular removal of refuse from unit incinerators, approximating 80 cubic yards per week.

The Council's refuse vehicles averaged a total of 3318 miles per month, collecting an average per month of 1875 cubic yards of refuse.

Salvage of wastepaper realised a total of 10 tons 13 cwts.

Disposal of refuse is by means of controlled tipping at various tips throughout the District. The main tip is on Council land at Bordon.

Cesspools and septic tanks were emptied upon request throughout the District as follows:-

Private properties	1178 loads
Council properties	<u>311 loads</u>
Total	<u>1489 loads.</u>

Nightsoil collections are made in defined areas of the various parishes, some twice weekly and some once weekly.

The Council maintain public conveniences at Bordon and Grayshott.

All public cleansing work is carried out by the Council's own vehicles and staff. One refuse vehicle was replaced during the year.

